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PTO/SB/81A (12-08)

Approved for use through 11/30/2011. OMB 0851-0036

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<b>PATENT - POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Patent Number	6,780,175
	Issue Date	August 24, 2004
	First Named Inventor	Rohit C. L. Sachdeva
	Title	MEDICAL INSTRUMENT WITH SLOTTED MEMORY METAL TUBE
	Attorney Docket Number	132.0007-01000

I hereby revoke all previous powers of attorney given in the above-identified patent.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) with respect to the patent identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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Please recognize or change the correspondence address for the above-identified patent to:

☒ The address associated with the above-mentioned Customer Number.

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	EVM SYSTEMS LLC				
Address	6136 Frisco Square Blvd., Suite 400				
City	Frisco	State	Texas	Zip	75034
Country	United States				
Telephone		Email			

I am the:

☐ Inventor, having ownership of the patent.

OR

☒ Patent owner.

Statement under 37 CFR 3.73(b) (Form PTO/SB/86) submitted herewith or filed on \_\_\_\_\_

SIGNATURE of Inventor or Patent Owner	
Signature	<i>Robert L. Harris</i>
Name	Robert L. Harris
Title and Company	President
Date	2/16/2011
Telephone	949-480-8300

NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ "Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**FEB 17 2011**

PTO/SB/96 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031  
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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: **EVM SYSTEMS LLC**Application No./Patent No.: **6,780,175**Filed/Issue Date: **August 24, 2004**

Titled:

**MEDICAL INSTRUMENT WITH SLOTTED MEMORY METAL TUBE****EVM SYSTEMS LLC**, a **Corporation**

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest in;
2. ☐ an assignee of less than the entire right, title, and interest in  
(The extent (by percentage) of its ownership interest is \_\_\_\_\_ %); or
3. ☐ the assignee of an undivided interest in the entirety of (a complete assignment from one of the joint inventors was made)  
the patent application/patent identified above, by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy therefore is attached.

OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: **Rohit Sachdeva and Peter Besselink**To: **Memory Medical Systems, Inc.**

The document was recorded in the United States Patent and Trademark Office at

Reel **023810**Frame **0424**

or for which a copy thereof is attached.

2. From: **Memory Medical Systems, Inc.**To: **Acacia Patent Acquisition LLC**

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3. From: **Acacia Patent Acquisition LLC**To: **EVM Systems LLC**

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☐ Additional documents in the chain of title are listed on a supplemental sheet(s).

☒ As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Signature

Printed or Typed Name

Date

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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